FEC FORM 2 STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full)	las Kelly Moth	anail Ko	ALE NE	7FRTAH	[[METCH	IZEDEK]	J.S. STATEDER
(b) Address (number and street)	\ MA □ Check if addre	ss changed	ella LIVE			cation Number	<u> </u>
1367 Chain Bridge Rd.	5436 Fallen	Leaf Sq.		3. Is This	M lov		Contacte
(c) City, State, and ZIP Code Mc Lcac, I/A 22161	FootWorth, T	X 761	79	Staten			Amended (A)
	5. Office Sought		6. State & Dis	trict of Candid	late		<u> </u>
Republican	PRESIDENT		Vicaio	<u>ia 875</u>	Congres	signal Di	अरांटी
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE							
7. I hereby designate the following name	ned political committee as n	ny Principal C	ampaign Com	mittee for the		election(s)	
(year of election) NOTE: This designation should be filed with the appropriate office listed in the instructions.							
(a) Name of Committee (in full)		-					
TEAM ELECT N (b) Address (number and street)	/ATHANAEL	-for	PRES	IDEN	TT Cla	n MR. Nath.	anoel Kelly)
1367 Chain Brid	ge Rd.						
McLean VA ZZIC							
8. I hereby authorize the following name candidacy. NOTE: This designation should be fit		nt Fundraising T my principal	Representation campaign co	ves)		end funds on b	ehalf of my
(a) Name of Committee (in full)						<u> </u>	
(a) Name of Committee (in full)							
(b) Address (number and street)							
(c) City, State, and ZIP Code							
I certify that I have exan	nined this Statement and to	the hest of m	v knowledge i	and helief it is	thie correct:	and complete	
Signature of Candidate	mico uno otalementario to			Date	True, correct a		
organization of the control of the c							
NOTE: Submission of false, erroneous,	or incomplete information i	may subject th	e person sign	ing this State	ment to penalt	ies of 52 U.S.C	. §30109.
0.00068							

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page 2 of 2

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

	candidacy. NOTE: This designation should be filed with the principal campaign committee.				
(a) Name of Committee (in full)				
(b) Address (number and street)				
(c	City, State, and ZIP Code				
	nereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. NOTE: This designation should be filed with the principal campaign committee.				
(8	n) Name of Committee (in full)				
(t	o) Address (number and street)				
(0	c) City, State, and ZIP Code				
C	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. NOTE: This designation should be filed with the principal campaign committee.				
(t	o) Address (number and street)				
(0	c) City, State, and ZIP Code				
c	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. NOTE: This designation should be filed with the principal campaign committee.				
(8	a) Name of Committee (in full)				
(t	b) Address (number and street)				
(0	c) City, State, and ZIP Code				





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